PATENT APPLICATION FEE DETERMINATION RECOF								Application or Docket Number					
								101717,045					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
TO	OTAL CLAIMS	45	-				RAT	E	FEE	7	RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA .		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			45 mir	านร 20=	* 25		X\$ 9)=	225	OR	X\$18=		
INDEPENDENT CLAIMS			7 mi	nus 3 =	* 4		. X43	=	172	OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+145	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	\L	782	OR	TOTAL		
CLAIMS AS AMENDED - PART II										4	OTHER	THAN	
(Column 1) (Column 2) (Column 3)							SMAI	LLE	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X43=	-		OR	X86=		
Ц,	FIRST PRESENTATION OF MULTIPLE DEPE				CLAIM		+145			OR	+290=		
1,824293336,40								AL		OB	TOTAL		
	(Oaluma 4) (Oaluma 6) (Oaluma 6)										ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS	1	(Colun		(Column 3)			ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	RATE	-	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	=		OR	X\$18=		
	Independent	*	Minus	***	<u> </u>	=	X43=			OR	X86=		
Ľ.	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENT	CLAIM		+145=	<u>.</u>		OR	+290=		
TOTAL ADDIT. FEE											TOTAL		
										JO. 1	ADDIT. FEE		
	`	(Column 1) CLAIMS		(Colum		(Column 3)	_		4 D D L			ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**:		=	X\$ 9=	:		OR	X\$18=		
	Independent	*	Minus	***		= .	X43=			OD.	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							╁		OR		· 	
										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
***	ir the ⁻Highest Nui Fhe "Highest Num	mber Previously Pa ber Previously Pai	aid For" IN 1HI	SPACE is Independe	nt) is the	n 3, enter "3." highest number fo	ound in the	appr	opriate box	in col	umn 1.		